



# Albuquerque NM Joint Venture



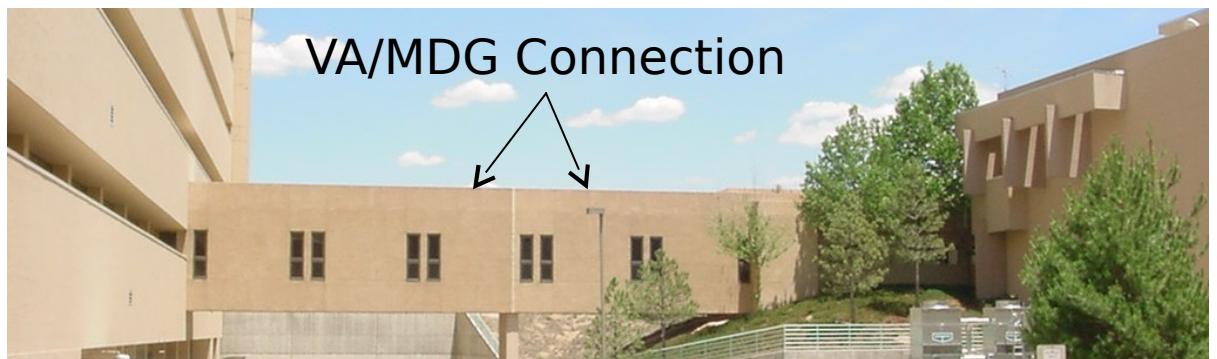
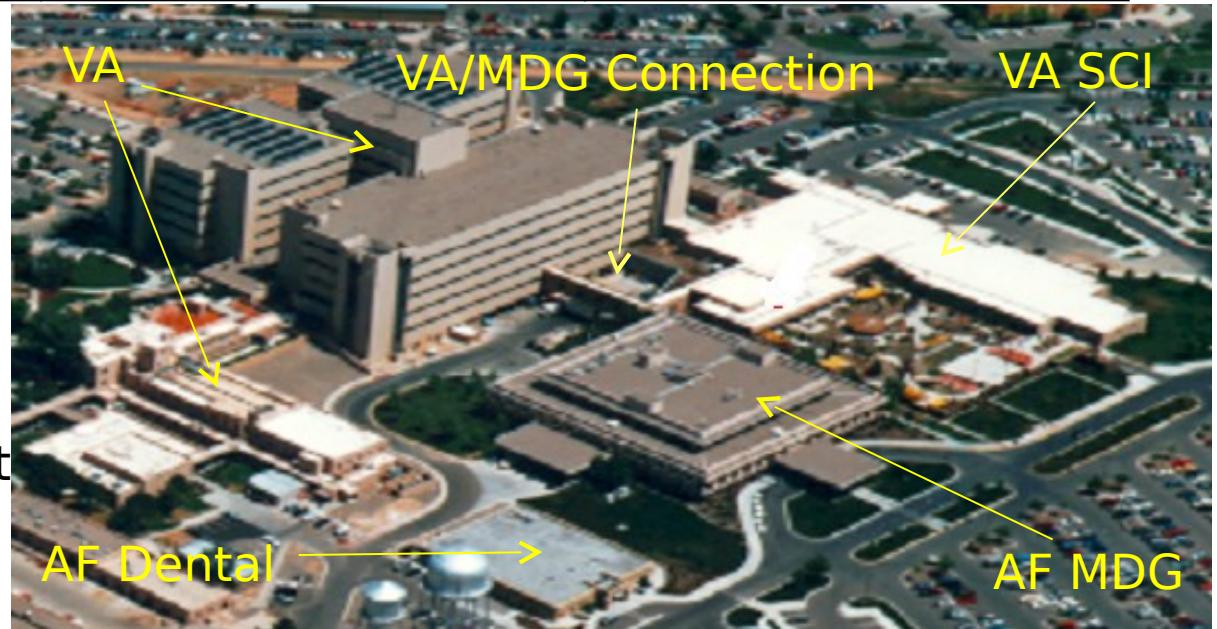
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# Albuquerque Joint Venture Overview

- VA/AF Comparison
- VA services provided to AF
- Current JIF projects
- New Sharing Agreement
- JMOWG recommendations
- Questions & Answers





# Albuquerque Joint Venture Demographics



## 377 MDG Statistics FY08

Operating Budget: \$24.4M  
(Excluding military payroll)

Authorized Staff: 348

Annual Workload

- Outpatient Visits: 72,000
- Prescriptions: 259,200

Beneficiary Population

- Eligible: 37,500
- Enrolled: 17,800

## NMVAHCS Statistics FY08

Operating Budget: \$328.9M  
Full Time Employees: 1,825  
Total Authorized/Operating Beds: 320/304  
Annual Workload

- Outpatient Visits: 554,185
- Unique patients: 55,492
- Inpatients Treated: 6,976
- JV Patients Treated: 9,880
- Prescriptions: 1,106,655

Beneficiary Population

- Veteran Population: 355,363
- Enrolled Veterans: 141,339



## Albuquerque Joint Venture Services



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# **NMVAHCS Currently Provides to 377 MDG:**

- Inpatient Care
- Outpatient Specialty Care
  - ENT
  - Audiology
- Surgical Services
- Emergency Department Services
- Laboratory Services
- Imaging/Radiology Services
- “Landlord” Services



# Albuquerque Joint Venture New Initiatives (JIF)

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## Laboratory Data Sharing Interface (LDSI)

- **Desired Outcomes:**
  - Enhance efficiency of healthcare delivery
  - Sharing of essential lab data VISTA and CHCS/AHLTA for continuity of care.
  - Enhance accuracy of HEDIS and PIMR data
- **Lessons learned:**
  - Identify potential pitfalls via SAV prior to JIF proposal in order to iron out any potential logistical/liability issues.
  - The complexities of LDSI on a systems level were never fully understood by both sides. A systems based approach needs to be primary for all future JIF I/T initiatives.



# Albuquerque Joint Venture New Initiatives (JIF)

## VA ED Renovation

- Desired Outcomes:
  - **ACCESS TO CARE.** Improve access to care for VA and DOD beneficiaries through streamlining the triage process, thus relieving a major impediment to increasing the overall efficiency of the NMVAHCS ED.
  - **QUALITY OF CARE.** Increase the quality of care by reducing rates of patients who leave without being seen, and by reducing overall ED encounter times. These measures have been shown to contribute to patient safety, which will benefit both VA and DOD beneficiaries.
- Lessons learned:
  - Original project scope too broad (current plan is to divide project into two phases)
  - Seek expertise from Architectural Engineers who have experience designing Emergency Departments



# New Sharing Agreement (SA)



## under development

- 377 ASU space VA Sharing
  - ASU Action item list created
    - Weekly Action list working group
    - ASU SA proposal being reviewed AFMSA/SG3S.
    - Projected start date 01 Aug 09.
      - Renovation of VA Surgery Unit begins Oct/Nov 09.
      - MDG ASU space will provide VA with 2 additional ORs during renovation.
      - Helps VA meet demand during construction
      - Brings MDG patients back to MTF vice referring to network
      - Current Life Safety Issues to be addressed



# **Joint Market Opportunities Group**

## **Recommendations**

### **Visit 20-21 September 2007**



- **Clinical Workload:**
  - ASU sharing:
    - Pursuing ASU SA. Projected start date 01 Aug 2009.
  - CRNA's sharing services in VA Pain Clinic:
    - No longer a valid recommendation. MDG no longer has CRNAs on staff.
  - Work to improve referral process:
    - VA/MDG referral Sub working group created May 09.



# **Joint Market Opportunities Group**

## **Recommendations**

### **Visit 20-21 September 2007**

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- Facilities:**

- Decon:**
    - Considering similar setup location for VA/MDG Decon equipment.
  - Explore Joint facilities meeting with Joint Venture Committee.**
    - Facilities has been incorporated as a standard agenda item in monthly Joint Venture Working Group (JVWG).



# **Joint Market Opportunities Group**

## **Recommendations**

### **Visit 20-21 September 2007**



- **Business Processes**
  - Look at possible Joint sharing initiatives and Joint incentive fund projects:
    - Submitted and working LDSI/ED JIF. Continue looking forward for future opportunities.
  - Consider expanding MRI hours and through a joint incentive fund project, hire additional staffing to accommodate the new hours.
    - This recommendation is on hold due to the VA being down staffed.



# Joint Market Opportunities Group

## Recommendations

### Visit 20-21 September 2007

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- **Business Processes (Continued)**
  - Look at combining Women's Health care services:
    - Researching eligibility rules and if MDG has capacity.
  - Continue discussions on ASU sharing:
    - Draft ASU SA proposal in progress
- **Governance Management**
  - Pursue Joint Incentive Fund Project – ASU
    - Draft ASU SA proposal is being reviewed by VISN Contracting Officer.



# Joint Market Opportunities Group

## Recommendations

### Visit 20-21 September 2007



- **IM/IT**

- The enterprise representatives will document the lab data sharing issue, and seek ideas for an electronic solution:
  - LDSI currently funded and being worked. Project at an impasse due to systems issues. AF partner is awaiting Contractor (SAIC) consultation.
- The local IT staff will continue to cooperate and share idea for further data sharing:
  - Incorporated as a standard agenda item in JVWG. Looking forward for future opportunities.
  - VA has established a Joint Venture Sharepoint website.



# Joint Market Opportunities Group

## Recommendations

### Visit 20-21 September 2007



- **Logistics**
  - Consider VA use of the AF office equipment contract:
    - VA considering to piggy back on AF contract. Savings of 1/2M per year.
  - Consider a consolidated biomedical equipment engineering support function to provide advanced training for AF technicians and to provide coverage during deployments.
    - AF has SA with VA to provide back-up MDG Biomedical services during contingencies.



# Joint Market Opportunities Group

## Recommendations

### Visit 20-21 September 2007



## • **Logistics (Continued)**

- VA might be able to offer ETO sterilization services to the AF:
  - Effective 01 Oct 08 VA assumed all responsibility for sterilizing for AF.
- VA could set up the AF as a secondary inventory point in their new MAXIMO inventory management system once it is deployed and implemented.
  - Sharing agreement in place thru 2012 Supply, Processing and Distribution (SPD)
  - Maximo not up and running.



# Joint Market Opportunities Group

## Recommendations

### Visit 20-21 September 2007

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- **Staffing:**

- Explore potential areas for sharing staff in ASU: GI scopes and contracts using AF support staff and CRNAs: working in VA pain clinic.
  - CRNA recommendation no longer valid. AF no longer has CRNAs on staff.
  - Proposed ASU SA indicates AF providers will have training opportunities in ASU space with VA staff. Once this training takes place long term JIF possibility will be determine.
- Explore JIF funding for a joint Community Based Outpatient Clinic.
  - TBD. Not reviewed yet
  - If proposed ASU SA is not feasible, possible use of ASU space and staff sharing for:
    - Joint Physical Therapy, Joint Referral Management Office, Joint Acute Care clinic



# **Joint Market Opportunities Group**

## **Recommendations**

### **Visit 20-21 September 2007**

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- Staffing (Continued)**

- Explore joint purchasing services such as Women's Health and Pediatric care:
  - Albuquerque needs to determine if MDG has capacity. This is a future JVWG discussion item.
- Explore sharing agreements where VA patients can be seen by DoD providers:
  - Researching eligibility rules and if MDG has capacity.



# **Joint Market Opportunities Group**

## **Recommendations**

### **Visit 20-21 September 2007**

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- **Education and Training**
  - Facilities are looking into joint decontamination training.
    - Albuquerque has a Joint Decontamination Team. Facilities are actively training together. Joint training conducted so far in 2009 includes: Decon shelter set up, donning equipment, VA participating in AF Decon exercise and team members serving as patients triaged through a Decon line.



# Joint Market Opportunities Group

## Recommendations

### Visit 20-21 September 2007

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- Education and Training (Continued)
  - Encouraged VA/AF to look into the satellite broadcast training JIF project to see if they can get linked in to the clinical training courses.
    - Education and training is a standard agenda item for JVWG.
    - Researching possibility of AF staff receiving training in VA in areas of Readiness Skills training. i.e., Pharmacy Technicians and Physical Therapy Technicians
    - VA researching the possibility of AF link to VA Employee Education System (EES) Satellite training courses.
- Research
  - Albuquerque JV VA/DoD Subject Matter Experts meeting to discuss possibility of 377 MDG staff participating in VA Research projects.